



County of Los Angeles
CHIEF ADMINISTRATIVE OFFICE

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DAVID E. JANSSEN
Chief Administrative Officer

February 22, 2006

To: Mayor Michael D. Antonovich
Supervisor Gloria Molina
Supervisor Yvonne B. Burke
Supervisor Zev Yaroslavsky
Supervisor Don Knabe

From: David E. Janssen
Chief Administrative Officer

Board of Supervisors
GLORIA MOLINA
First District

YVONNE B. BURKE
Second District

ZEV YAROSLAVSKY
Third District

DON KNABE
Fourth District

MICHAEL D. ANTONOVICH
Fifth District

REPORT ON THE MARTIN LUTHER KING, JR./DREW MEDICAL CENTER QUALITY ASSURANCE OVERSIGHT COMMITTEE

On October 25, 2005, your Board requested that my office, in coordination with the Director of the Department of Health Services (DHS) and the Chief Executive Officer (CEO) of Martin Luther King, Jr./Drew Medical Center (KDMC), report back with clarification of the role of the KDMC Quality Assurance Oversight Committee and a list of Committee members, as determined by the KDMC CEO and the Director.

Ms. Antionette Smith Epps, CEO, KDMC, recently finalized the KDMC organizational structure, achieving governing body approval for the new structure on January 31, 2006. The new structure outlines a new quality reporting relationship for all functions relating to quality improvement, organizational quality management, regulatory compliance, risk management, case management, utilization review and reporting. Attachment I is the new KDMC organization chart with the new Quality Management structure.

The CEO Quality Advisory Group, also referred to by Ms. Epps as the Quality Circle, will receive information regarding hospital operations and patient care, including environment of care, regulatory, patient safety, clinical support, infection control and physician performance issues. Responsibilities of the group will include the review of information regarding the quality of professional care provided by professional staff and/or other employees of KDMC. The records and proceedings of the Quality Circle in fulfilling that particular responsibility should be protected from involuntary disclosure under State law, and the records of other responsibilities may also be protected as well.

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Other responsibilities include the review of policies and procedures and assuring compliance with third party quality assurance standards. Attachment II is the draft charter for use of the KDMC Quality Circle. The first meeting of the newly organized Quality Circle is scheduled for March 13, 2006, and the group will meet at least six times per year.

The Quality Circle consists of seven members. Two individuals who served previously on the quality assurance workgroup of the KDMC Hospital Advisory Board have been invited to serve, Drs. Kenneth Kizer and Linda Burnes Bolton. Both Ms. Epps and Dr. Chernof believe it is important to continue to seek the expertise offered by both of these individuals in advancing the goal of creating excellence at KDMC.

The remaining five members are DHS staff involved in quality assurance oversight at KDMC and for DHS: the chair of the KDMC Medical Executive Committee, Dr. Samuel Shacks; the Director of DHS Performance and Quality Management, Ms. Laura Sarff; the KDMC Chief Nursing Officer, Ms. Dellone Pascascio; and the KDMC Pharmacy Director, Mr. John Sang. Other KDMC and DHS staff members will participate in these meetings as required to support the group's functions. The Chief Quality Officer for KDMC, once identified, will also serve on the Quality Circle.

As established by Ms. Epps, the Quality Circle is a significant component of the enhanced KDMC quality organizational structure, which also includes a strengthened position of Chief Quality Officer, a responsibility within the office of the KDMC Medical Director. The responsibilities of this position are currently performed by Dr. Roger Kaiser of Navigant Consulting, Inc.

If you have questions or need additional information, please contact me or your staff may contact Sheila Shima, of my office, at (213) 974-1160. Questions or requests for additional information regarding the Quality Circle and the new KDMC quality management structure may also be directed to Ms. Epps at KDMC, (310) 668-5201.

DEJ:DIL
SAS:bjs

Attachments

c: Executive Officer, Board of Supervisors
County Counsel
Acting Director of Health Services
Chief Executive Officer, KDMC

Charter

KDMC Quality Circle

CEO Quality Advisory Group

Introduction

The King/Drew Medical Center (KDMC) Quality Circle shall serve as advisory to the Chief Executive Officer and the Governing Body in matters relating to quality oversight of all KDMC quality functions, both clinical and administrative.

Purpose

The purpose of the KDMC Quality Circle is to review and recommend to the KDMC CEO and Governing Body performance and quality improvement strategies necessary to enhance the quality of outcomes at KDMC. Such enhancements shall be the product of continuous improvement in patient care and other support activities at KDMC and shall be demonstrated by comparisons and benchmarking to nationally recognized best practices.

KDMC Quality Circle Charge

The Quality Circle shall be responsible for the following activities:

1. Reviewing and recommending plans and processes for meeting federal, state and county requirements and for maintaining appropriate accreditations and certifications;
2. Reviewing and recommending monitoring methods to assess performance of the Medical/Dental Staff.
3. Regularly reviewing selected performance indicators and/or other performance data and reporting the findings and their significance to the governing body, including but not limited to the review of staff performance against clinical and professional standards of practice;
4. Reviewing and recommending action on the KDMC Performance Improvement and Patient Safety Plans;
5. Reviewing, revising (if appropriate) and tracking compliance with KDMC policies and procedures for identifying, reporting and investigating sentinel events and/or unplanned clinical occurrences.
6. Reviewing and integrating all department and service quality assurance and performance improvement activities, feedback from external stakeholders, customer satisfaction surveys and performance indicator data, and making recommendations to the governing body, as determined by analysis of data from these sources.
7. Making recommendations to the CEO and governing body regarding participation in national performance reporting activities and quality improvement initiatives such as but not limited to those promoted by the

California Nursing Outcomes Coalition, Hospital Quality Alliance, the Leapfrog Group (e.g., Safe Practices Survey), the National Quality Forum, and the Institute for Healthcare Improvement (e.g., the 1000 Lives Campaign).

Membership

The Quality Circle shall consist of seven members; 2 community recognized leaders in quality improvement, KDMC Medical Executive Committee Chairperson, DHS Performance and Quality Management Director, KDMC Chief Nursing Officer, KDMC Chief Quality Officer and KDMC Pharmacy Director.

Quality Circle Reports

The Quality Circle will report directly to the KDMC governing body, and share its findings with the KDMC Chief Executive Officer

Quality Circle Meetings

The Quality Circle shall meet at least 6 times per calendar year and otherwise as called by the chairperson.

Quality Circle Committees

The Quality Circle may fulfill its responsibilities directly, or through committees composed of some or all of its members and other individuals as appointed by the Chair.